SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp) (Received) UUU

P 1 _ 2017 Carried A mi

	8			
Refund:		Amount Paid:	Date:	Permit #:
		がみよどう	54-17	17-01/0

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Bayfield Co. Zoning Dept

TYPE OF PERMIT REQUESTED—▶	QUESTED-	► □ LAND USE		☐ SANITARY ☐ PRIVY		ANDITIONA	GONDITIONAL USE GRECIAL USE	TAL USE	□ В.О.А.	□ OTHER	Ä
Owner's Name:	T B	of		Mailing Address:		City City	City/State/Zip:	W/. 5	1865	Telephone: 7/5-/74-37	47791
Address of Property:				City/State/Zip:						Cell Phone:	
Contractor:				Contractor Phone:		Plumber:			<u></u>	Plumber Phone:	Œ.
Authorized Agent: (Person Signing Application on behalf of Owner(s))	son Signing Appl	ication on behalf o		Agent Phone:		nt Mailing Adı	Agent Mailing Address (include City/State/Zip):	state/Zip):	□Aŧ₩	Written Authorization Attached Yes No	rization
PROJECT LOCATION	Legal Description:		(Use Tax Statement)	Tax ID# (4-5 digits)	うそえし	439		Recorded De Document #:	ed (i.e. # a	gned by Regis	ter of Deeds)
1/4,	1/4	Gov't Lot	ot Lot(s)	CSM Vol	& Page	Lot(s) No.	Block(s) No.	Subdivision	:i	***************************************	
Section 3	, Township	2	N, Range	W To.	Town of:			Lot Size		Acreage	
	☐ Is Property Creek or Lan	ls Property/Land within 300 feet of F Creek or Landward side of Floodplain?	300 feet of River	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes—continue —▶		Distance Stru	Distance Structure is from Shoreline:	eline : feet	Is Property in Floodplain Zone?		Are Wetlands Present?
_ Snoreland	☐ is Property	y/Land within :	🛚 Is Property/Land within 1000 feet of Lake,		\	Distance Structure	cture is from Shoreline :	eline :	☐ Yes ☐ No		□ Yes □ No
Non-Shoreland											
Value at Time of Completion * include donated time & material	Project		# of Stories and/or basement	ent Use		of bedrooms	Sew !s	What Type of Sewer/Sanitary System is on the property?	e of y System perty?		Water
	☐ New Construction	truction	1-Story	Į 🗆	2] 1	☐ Municipal/City	Jity Specify	v Tyne:		□ City
1506	Conversion	+	1 1		++		Sanitary (Exists) Specify Type:	ists) Speci	y Type:		
	Run a Business on Property	' , 	□ No Basement □ Foundation □	ent		None	1) 1	service con	vice contract)	(Barrer)	watch door in the manufacture and and other
Existing Structure: (if permit being applied for is relevant to it)	(if permit bei	ng applied for	is relevant to it)	length:	44		Width: 30		Height		
Proposed Construction:	tion:			Length:	28		Width:	7	Height:	3	
Proposed Use	7			Proposed Structure	Structure			Di.	Dimensions	T 0	Square Footage
		Principal St	ructure (first	Principal Structure (first structure on property)	operty)				×		
Net-		Residence	(i.e. cabin, hun	Residence (i.e. cabin, hunting shack, etc.) with Loft					××	<u> </u>	
Residential Use	ř		with a Porch			mm mm a account a second property of the prope		(×	· _	
			with a Deck	CI					××		
			with (2 nd) Deck	S				_	×)	
Commercial Use	se		with Attached Garage	d Garage			***************************************	_	×	_	
		Bunkhouse	w/ (□ sanitary,	Bunkhouse w/ (□ sanitary, or □ sleeping quarters, or	quarters, <u>or</u>	□ cooking &	☐ cooking & food prep facilities)		×		
		Mobile Hor	Mobile Home (manufactured date) Addition/Alteration (specify)	ed date)					×		A THE PARTY OF THE PROPERTY OF THE PARTY OF
Municipal Use		Accessory Building	Building (specify)	cify)	***************************************	,			×		
	×	Accessory I	Building Additi	Accessory Building Addition/Alteration (specify)	(specify)			1 2	×	339	77
		Special Use: (explain)	e: (explain)						×		
		Conditiona	Conditional Use: (explain)						×		
		Other: (explain)	lain)					_	×	_	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES on (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) rail and accuracy of all information I (we) an (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the preparation of the purpospy (inspection.)

Authorized Agent:

Owner(s):

(If there are Multiple

listed on the Deed All Owners

must sign or letter(s) of authorization must accompany this application)

LOR

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this

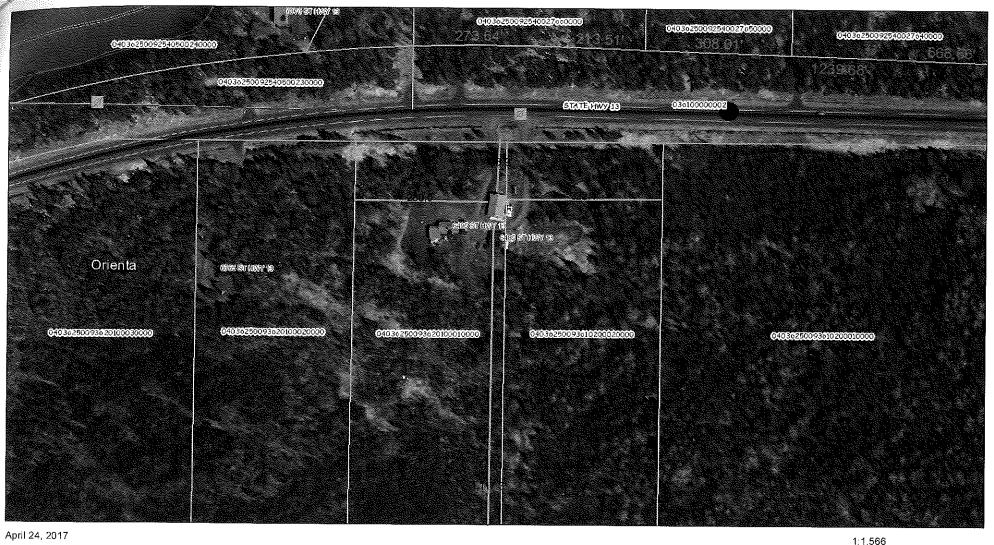
Address to send permit

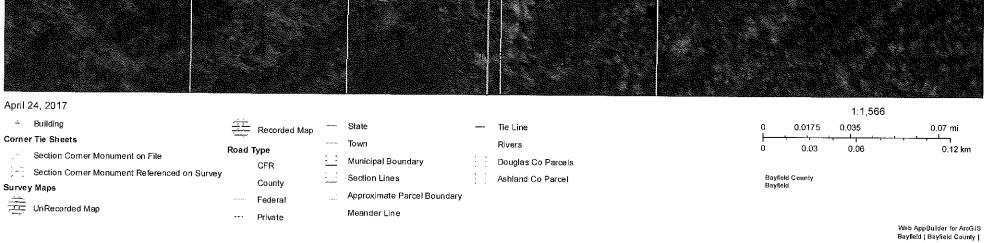
Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Date

Hold For Sanitary:	Signature of Inspector:		Date of Inspection: 5, 2, 1) Inspection Condition(s): Town, Committee or Board Conditions Attached?	Inspection Record: Fillers on out of builty	Was Parcel Legally Created Was Proposed Building Site Delineated	Granted by Variance (B.O.A.) Yes No Ca	ling by		Issuance Information (County Use Only) Permit Denied (Date):	(9) Stake or Mari NOTH For The Const	Order previously surveyed corner or marked by a licensed surveyor at the winer's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.	Setback to Drivy (Portable, Composting) Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet of the minimum.	Setback to Septic Tank or Holding Tank	Setback from the West Lot Line Setback from the East Lot Line	Setback from the North Lot Line	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	Description	(8) Setbacks: (me	Please complete (1) - (7) above (prior to continuing)			(1) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*):	ox below: <u>Draw</u> or <u>Sk</u>
Hold For TBA:	A CONTRACTOR OF THE CONTRACTOR	ANCESSION SERVICES	Board Conditions Attack	ty out of pu	X/Yes	1 #	☐ Yes (Deed of Record) XYes (Fused/Contiguous Lot(s)) ☐ Yes	1.		k Proposed Location(: CE: All Land Use Permits ruction Of New One & T The local Tov	y a licensed surveyor at the own fucture more than ten (10) feet b reviously surveyed corner, or ve expense.	DOSTING) ucture within ten (10) feet of th	ng Tank	٠,		latted Road ght-of-Way		Setbacks: (measured to the closest point)	ove (prior to continuing				(e <u>tch</u> your Property (reg
Hold For Affidavit:			ected by:	alion for			us Lot(s)) \(\sum \chi \chi \chi \chi \chi \chi \chi \chi	Permit Date:	Sanitary Number: Reason for Denial:	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	ief's expense. out less than thirty (30) feet from rifiable by the Department by us	Feet Feet Feet Feet Feet Feet Feet Feet	100 Feet	722 Feet		/p0 Feet	Measurement	point)	()			Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	Draw or Sketch your Property (regardless of what you are applying for)
**************************************			(If No they need to be by ached.)	eppusan	Were Property Lines	Previously Granted by ☐ Yes ☐ No	Mitigation Required Mitigation Attached	<i>CI-1</i>		, <u>Septic Tank (ST)</u> , <u>Dra</u> m the Date of Issuance i Municipalities Are Req Federal agencies may a	n the minimum required setbac se of a corrected compass from	e boundary line from which the	Setback to Well	20% Slope Area on property Elevation of Floodplain	Setback from the	Setback from the Setback from the			Cha			ad (Name Frontage Ro perty (*) Drain Field (DF); (' sek; or (*) Pond	e applying for)
Hold For Fees:			iched.)	c are To	Represented b Was Property S	Granted by Variance (B.O.A.)	□Yes \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		# of bedrooms:	in field (DF), Holding Ti f Construction or Use ha ired To Enforce The Un lso require permits.	k, the boundary line from which a known comer within 500 feet	setback must be measured mu		n property plain	Bank or Bluff	Setback from the Lake (ordinary high-water m Setback from the River, Stream, Creek	Description		Changes in plans must be approv			ad) ⁸) Holding Tank (HT) aı	
	Date of Approval:		Date of Re-Inspection:	Zoning District (/k Lakes Classification (/	yes Yes	<u>11</u>	Affidavit Required Affidavit Attached		Sanitary Date:	ank (HT), Privy (P), is not begun. Iform Dwelling Code	the setback must be meas of the proposed site of the	st be visible from one previ				ater mark)						nd/or (*) Privy (P)	
	orpyal: 17		pection:	tion (NA)	No I No		d pres prio		-	and <u>Well</u> (W). ³ .	ured must be visible from structure, or must be	lously surveyed corner to the	Feet	Yes No	Feet	Feet Feet	Measurement	9.000	ed by the Planning & Zoning Dept.				~

Bayfield County Web AppBuilder





Village, State or Federal May Also Be Required

SANITARY SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

17-0110 Kenneth & Ingeburg Johnson Issued To: No. E 1/2 E 1/2 NE Location: NW 36 Township 50 Orienta 1/4 of Range Section W. Town of Subdivision CSM# Block Gov't Lot Lot

For: Residential Accessory Structure: [1- Story; Storage (28' x 14') = 392 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s):

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Jennifer Murphy

Authorized Issuing Official

May 4, 2017

Date